## FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6) AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	-
OMB A	<b>APPROVAL</b>

OMB NUMBER: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response.................16.00

	SEC USE ONL	Y	
Prefix			Serial
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	Date Received		
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2 1-	an amendment and name has chang	ed, and indicate ch	ange.)		
Offering of Shares of Beneficial Interest Filing Under (Check box(es) that apply):		⊠ Rule 506	☐ Section 4(6)	□ ULOE	
• • • • • • • • • • • • • • • • • • • •	Amendment	M Kaic 500	Baction 4(0)	_ 020E	
	A. BASIC IDENTIF	ICATION DATA	·		
1. Enter the information requested about	the issuer				
Name of Issuer ( Check if this is an a Pyramis Core Plus Fund, LLC	amendment and name has changed,	and indicate chang	(e.)	<b>4</b>	
Address of Executive Offices	(Number and Street, C	City, State, Zip Coo	ie) Telephone N	lumber	88. 25
c/o Fidelity Institutional Funds Manager,	Inc., 82 Devonshire Street, Bestur	MAPS HOCK	617-563-700	20	
Address of Principal Business Operations	(Number and Street,	eny, State, Bit Co.	Telephone N	Number	**************************************
(if different from Executive Offices)	S	EP 2 4 2007	17		7077938
Brief Description of Business			E		
A limited liability company organized to investors.	provide for the collective investme	HOMSON INANCIAL	wments, foundation	s and certain other elig	zible
Type of Business Organization					
□ corporation	☐ limited partnership, already t		⊠other (please sp	ecify); limited liability	company /
□ business trust	☐ limited partnership, to be for	med		·	
Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organiza	•			D E	: : : :

### GENERAL INSTRUCTIONS

#### Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

## A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
  Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	□ Beneficial Owner	☐ Executive Officer  of Manager	□ Director	□ General and/or      ■ Managing Partner*
			or manager	* as the	Issuer's Managing Member
Full Name (Last name first, if ind	ividual)	- h			
Fidelity Institutional Funds Mana	ger, Inc.	· · · · · · · · · · · · · · · · · · ·	!		
Business or Residence Address	(Numbe	er and Street, City, State, Z	ip Code)		
82 Devonshire Street, Boston MA	\ 02109				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	(ividual)		of Manager	,,,,	Managing Fattici
	,				
Walsh, Vincent P. Business or Residence Address	(Numb	er and Street, City, State, Z	in Code)	<del></del>	
c/o Fidelity Institutional Funds M Check Box(es) that Apply:	lanager, Inc., 82 De ☑ Promoter	Beneficial Owner	□ Executive Officer	□ Director	☐ General and/or
Check box(es) mat Apply:	Z Floinotei		- Exceptive Officer	_ Director	Managing Partner
Full Name (Last name first, if ind	lividual)		<del></del>		
Fidelity Alternative Investments	Group				
Business or Residence Address	(Numb	er and Street, City, State, Z	ip Code)		
82 Devonshire Street, Boston MA	A 02109				
Check Box(es) that Apply:	□ Promoter	□ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				Managing Faither
7 611 7 41110 (2242) 114110 11121, 11 1112	,				
Business or Residence Address	(Numb	er and Street, City, State, Z	in Code)		
Dustiness of regulation real and	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-F,		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or
					Managing Partner
Full Name (Last name first, if ind	lividual)				
Business or Residence Address	(Numb	er and Street, City, State, Z	ip Code)		
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				Triumaging Further
,					
Business or Residence Address	(Numb	er and Street, City, State, Z	ip Code)		
	·	•			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
					Managing Partner
Full Name (Last name first, if inc	lividual)				
Business or Residence Address	(Numb	er and Street, City, State, Z	ip Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or
Full Name (Last name first, if inc					Managing Partner
Full Planic (Last Baine 1951, 1) 100	iividuai)				
Dunings on Basidana Add	/N	or and Street City State 7	in Code)		
Business or Residence Address	Опшин	er and Street, City, State, Z	ap code)		

				B. INF	ORMATIC	N ABOUT	OFFERI	NG				
1. Has the iss	ner sold o	r does the is	suer intend	to sell, to r	on accredit	ed investor	s in this off	ering?				No ⊠
1. 1143 110 133	aci 2014, o	1 0003 1110 13			Appendix,						_	
					• •		_				A AE 00	0.000+
2. What is the					from any in Ianaging M						\$ <u>\$5,00</u>	<u>0.000*</u>
		Subject to	ine discreti	on or are iv.	tanaging ivi	cinoci to ac	сері пікла	in Comment	3 07 103507 0		Yes	No
3. Does the o	ffering pen	mit joint ow	nership of	a single uni	it?						D	⊠
4. Enter the information agent of a bropersons to be	for solicita ker or deal listed are a	tion of pure er registered ssociated pe	hasers in co I with the S ersons of su	onnection v EC and/or	vith sales of with a state	securities i or states, li	n the offeri	ng. If a per of the brok	son to be li ter or deale	sted is an r. If more	associated than five	l person or
Full Name (L	ast name fi	rst, if indivi	dual)									
Fidelity Alten							tional Servi	ices Compa	лу			<del></del>
Business or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	.oge)						•
82 Devonshir		~										
Name of Asso	ciated Bro	ker or Deale	ег			. :						
States in Whie	ch Person I	isted Has S	Solicited or	Intends to	Solicit Purc	hasers						<u> </u>
		or check in									All State	:s
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[H]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	(LA)	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ] [TX]	[NM] [UT]	(NY) (VT)	[NC] [VA]	[ND] [WA]	[OH]	[OK] [WI]	(OR) (WY)	(PA) (PR)
[RI]	[SC]	[SD]	[TN]	[IA]	[01]	[ 1 1 ]	[44]	[117]	[""]	[441]	[11.1]	11.13
Full Name (L	ast name n	rst, it indivi	auar)	ě								
Business or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)	<del> </del>				-	
Name of Asso	ociated Bro	ker or Deal	er									
States in Whi												
											J All State	
(AL)	[AK]	[AZ]	[AR] [KS]	[CA] [KY]	(CO)	[CT] [ME]	(DE) (MD)	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
[IL] (MT)	(IN) (NE)	[IA] [NV]	[NH]	[NJ]	(LA) (NM)	[NY]	(NC)	[ND]	[M1] [OH]	[OK]	[OR]	[PA]
(RI)	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L		<del></del>	<u> </u>			<u> </u>						
Business or R	tesidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
Name of Asso	ociated Bro	ker or Deal	er			·					=	
States in Whi	ch Person I	isted Has S	Solicited or	Intends to	Solicit Purc	hasers						
•	-									c	All State	:s
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
(RI)	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

alı ch	nter the aggregate offering price of securities included in this offering and the total amount ready sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, eck this box and indicate in the columns below the amounts of the securities offered for exchange dalready exchanged.					
	Type of Security		regate ring Pric		moui	nt Already Sold
	Debt	\$	0	_	\$	0
	Equity	\$	0 _	-	\$_	. 0
	□ Common □ Preferred					
	Convertible Securities (including warrants)	\$	0	_	\$	0
	Partnership Interests		0	_	<b>\$</b>	0
	Other (Specify Shares of Beneficial Interest	\$ <u> </u> 1	,000,000,	000	\$ <u>38</u>	3,312,032
	Total	\$_!	,000,000,	.000	\$ 38	3,312,032
	Answer also in Appendix, Column 3, if filing under ULOE.					
of the	nter the number of accredited and non-accredited investors who have purchased securities in this fering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate a number of persons who have purchased securities and the aggregate dollar amount of their purchases the total lines. Enter "0" if answer is "none" or "zero."	-	lumber ivestors		Dol	Aggregate lar Amount Purchases
	Accredited Investors		2	_	\$ <u>38</u>	3,312,032
	Non-accredited Investors		0	-	\$	0
	Total (for filings under Rule 504 only)	_	0	_	<b>\$_</b>	0
	Answer also in Appendix, Column 4, if filing under ULOE.					
so	this filing is for an offering under Rule 504 or 505, enter the information requested for all securities ld by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		;	N/A	ı	
	Type of offering		ype of		Dol	lar Amount
	Rule 505	S	ecurity N/A		\$	Sold N/A
	Regulation A		N/A_	_		N/A
	Rule 504		N/A	-		N/A
	Total		N/A	_		N/A
4. a.	Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		. 1767	_	<b>-</b>	
	Transfer Agent's Fees				\$	0
	Printing and Engraving Costs				\$	0
	Legal Fees			Ø	\$	5,000
	Accounting Fees				\$	0
	Engineering Fees			0	\$_	0
	Sales Commissions (specify finders' fees separately)				. —	0
	Other Expenses (identify) Blue Sky Filing Fees					1,250
	Total					6.250

Andrew Communication

	C. OFFERING PRICE	, NUMBER OF INVESTORS, EXPENSES AND USE	OF P	ROCEEDS		
5.	I and total expenses furnished in response "adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted grused for each of the purposes shown. If the assimate and check the box to the left of the	ross proceeds to the issuer used or proposed to be amount for any purpose is not known, furnish an estimate. The total of the payments listed must equal forth in response to Part C - Question 4.b above.		Payments to Officers.	:	\$ <u>999,993,750</u>
				Directors, & Affiliates		Payments To Others
	Salaries and fees			\$		\$
	Purchase of real estate			<b>s</b>		\$
	Purchase, rental or leasing and installation	on of machinery and equipment	o	\$		\$
	Construction or leasing of plant building	s and facilities		\$		\$
	offering that may be used in exchange for	ng the value of securities involved in this or the assets or securities of another		\$		¢
				\$ \$		
	• •			\$ \$		
	- ·	ent securities		\$ \$_0		
	· • • • · · · · · · · · · · · · · · · ·	ant Securities		\$ <u>0</u>		\$999,993,750
	Coldina Totals		ш	\$_ <u>U</u>		Φ <u>ΑΑΑ'ΑΑ'' (70</u>
	Total Payments Listed (Column totals ac	lded)		□ \$2	<u>99.9</u>	<u>93.750</u>
	·	D. FEDERAL SIGNATURE				
	following signature constitutes an undertakin	need by the undersigned duly authorized person. If this not g by the issuer to furnish to the U.S. Securities and Exchasssuer to any non-accredited investor pursuant to paragraph	nge C	ommission, upo		
Iss	uer (Print or Type)	Signature		Date		
Py	ramis Core Plus Fund, LLC	Pyramis Core Plus Fund, LLC By: Fidelity Institutional Eunds Manager, In its Managing Member  By:	c.,	September	13,	2007
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)				
Vi	ncent P. Walsh	Vice President				
• •		· <b>·</b>				

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

